FOR NUMBER FILED NUMBER EXTRA BASIC FEE TOTAL CLAIMS MINDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT TOTAL CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT TOTAL CLAIM PRESENT TOTAL CLAIMS MINDEPENDENT CLAIM PRESENT TOTAL CLAIM PRESENT TOTAL CLAIMS MINDEPENDENT CLAIM PRESENT TOTAL CLAIMS MINDEPENDENT CLAIM PRESENT TOTAL CLAIMS TOTAL CLAIM	OTHER SMALL E OR SMALL E OR X\$18= OR X78= OR +260= OR TOTAL OTHER SMALL E	FEE 690.00 [3] [4] THAN
FOR NUMBER FILED NUMBER EXTRA BASIC FEE TOTAL CLAIMS Minus 20= * 345.00 X\$ 9= INDEPENDENT CLAIMS minus 3 = * MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero enter "0" in column 2	OR X\$18= OR X78= OR +260= OR TOTAL OTHER	FEE 690.00 6/3 //// THAN
BASIC FEE TOTAL CLAIMS 5 // minus 20= * 3 // X\$ 9=	OR X\$18= OR X78= OR +260= OR TOTAL OTHER	690.00 6/3 /3/3 /4/8 THAN
TOTAL CLAIMS 54 minus 20= * 34 INDEPENDENT CLAIMS minus 3 = * 2 MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero enter "0" in column 2	OR X\$18= OR X78= OR +260= OR TOTAL OTHER	
INDEPENDENT CLAIMS minus 3 = 1	OR X78= OR +260= OR TOTAL OTHER	
MULTIPLE DEPENDENT CLAIM PRESENT +130= (1)	OR +260= OR TOTAL OTHER	
+130= +130=	OR TOTAL OTHER	
If the difference in column 1 is less than zero, enter "0" in column 2	OTHER	
TOTAL TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY (Column 3)		ENTITY
CLAIMS HIGHEST NUMBER PRESENT ADDI-	RATE	ADDI- TIONAL FEE
Z Table	OR X\$18=	
Independent + Minus +++ = X39=	OR X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		
TOTAL	OD TOTAL	
ADDIT. FEE	OR ADDIT. FEE	
CLAIMS HIGHEST ADDI-] [ADDI-
AFTER AMENDMENT PREVIOUSLY EXTRA RATE TIONAL FEE	RATE	TIONAL FEE
Total + Minus ++ = X\$ 9=	OR X\$18=	
Independent * Minus *** = X39=	OR X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	OR +260=	
TOTAL	OD TOTAL	
ADDIT. FEE	ADDIT. FEE	
CLAIMS HIGHEST	1	ADDI-
NUMBER PRESENT EXTRA RATE TIONAL FEE Total	RATE	TIONAL FEE
Total + Minus ++ = X\$ 9=	OR X\$18=	
Independent + Minus +++ = X39=	OR X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box	ADDIT. FEE	